## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

RE APPLICATION OF: V. Raman Sukumar, M.D.

**APPLICATION NO.: 10/821,678** 

**GROUP ART UNIT: 1797** 

FILED:

April 8, 2004

**EXAMINER: JYOTI NAGPAUL** 

TITLE:

MOBILE INTRA-OPERATIVE MICROSCOPIC DIAGNOSIS

ATTY DOCKET NO: RS03-232

LABORATORY

DATE:

January 12, 2009

Honorable Commissioner of Patents and Trademarks P. O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

## **FEE TRANSMITTAL**

Previously an issue fee had been paid in the amount of \$720.00, which mistakenly did not show up as a previous paid issue fee. Upon discussion with the patent office, I was directed to pay the remainder on the issue fee of \$35.00. Therefore, attached is a check for \$35.00 for the remaining outstanding amount due for the issue fee and a separate check for the advanced order of ten (10) copies of the patent in the amount of \$30.00. The confirmation number for the call regarding the issue fee is 1-138114627. The issue fee is due on February 26, 2009, please contact us as soon as possible if the fees paid by the attached checks are not correct.

Respectfully submitted.

OHN C. ANDRADE, ESQUIRE

Attorney for Applicant Registration No. 31,919

Telephone: (302) 678-3262

January 12, 2009

JAN 1 ? 7009 B

tle of the Invention: Mobile Intra-Operative Microscopic Diagnosis Laboratory

Full Name of the Inventor: V. Raman Sukumar, M.D.

Docket No.: RS03-232

Attorney's Name: John C. Andrade, Esquire

## **CERTIFICATE OF MAILING BY "EXPRESS MAIL"**

"Express Mail" Mailing Label Number: EH122637242US

Date of Deposit: January 12, 2009

I hereby certify that this paper is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. 1.10 on the date indicated above and is addressed to the Commissioner of Patents and Trademarks, P. O. Box 1450, Alexandria, VA 22313-1450.

JOHN C. ANDRADE, ESQUIRE

January 12, 2009

PART B - FEE(S) TRANSMITTAL

omplete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
Commissioner for Pate

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (571)-273-2885

or Fax

RUCTIONS his form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate our their correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for

caintenance fee notifica	itions.							
CURRENT CORRESPOND	ENCE ADDRESS (Note: Use BI	Fee( pape	s) Transmittal. Thi ers. Each additiona	is certificate c l paper, such	annot be used for as an assignment	r domestic mailings of the or any other accompanying nt or formal drawing, must		
1	Have	have its own certificate of mailing or transmission.						
John C. Andrao 116 West Water P.O. Box 598	Street		l her State addr trans	reby certify that thes Postal Service we essed to the Mail	is Fee(s) Trai vith sufficient Stop ISSUE	ailing or Transinsmittal is being postage for firs FEE address -2885, on the default of the defa	mission deposited with the United t class mail in an envelope above, or being facsimile ate indicated below.	
Dover, DE 1990				JOHN C	. AND	RAPE	(Depositor's name)	
				Tal-	0.0	Idrad	(Signature)	
				1/12/20	209	(Date)		
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	INVENTOR ATTORNEY DOCKET N		DOCKET NO.	CONFIRMATION NO.	
10/821,678	04/08/2004		V. Raman Sukumar		RS0	3-232	1379	
TITLE OF INVENTION: MOBILE INTRA-OPERATIVE MICROSCOPIC DIAGNOSIS LABORATORY 61/13/2009 NAGUYEN2 66666113 16821678								
<b>Ś</b>			91 ( 92 (				755.00 OP 30.00 OP	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE TOT	TAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$755	\$0	\$0		\$755	02/26/2009	
EXAMINER		ART UNIT	CLASS-SUBCLASS	9djustaent date: 01/13/2009		/13/2009 NN	BRIENS .	
NAGPAUL, JYOTI		1797	436-174000	01 FC:1506			-720.00 OP	
CFR 1.363).	ence address or indicatio	·	2. For printing on the part (1) the names of up to or agents OR, alternative	3 registered pater		1 John	C. Andrade	
Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or typ	ne)				
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.								
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
							•	
Please check the appropr	riate assignee category or	categories (will not be pr	rinted on the patent) :	Individual Co	orporation or	other private gro	oup entity Government	
4a. The following fee(s) are submitted:  4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.							shown above)	
Publication Fee (N	No small entity discount p	Payment by credit card. Form PTO-2038 is attached.						
Advance Order -	# of Copies	The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number(enclose an extra copy of this form).						
5. Change in Entity Sta	tus (from status indicate		☐ b. Applicant is no long	ger claiming SMA	LL ENTITY s	status. See 37 Cl	FR 1.27(g)(2).	
NOTE: The Issue Fee an	d Publication Fee (if req	uired) will not be accepte	d from anyone other than the	he applicant; a regi	stered attorne	y or agent; or th	e assignee or other party in	
Authorized Signature		androde		Date /	112/0	9		
Typed or printed nam	(1-1-1	C. Andra	do	Date	lo. 31,	9/9		
an application. Confiden	itiality is governed by 35	U.S.C. 122 and 37 CFR	1.14. This collection is est	imated to take 12 i	minutes to co	mplete, includin	by the USPTO to process), g gathering, preparing, and ne you require to complete artment of Commerce, P.O.	

Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.